

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Patent Number

10/534769

## CLAIMS AS FILED - PART I

(Column 1)	(Column 2)	SMALL ENTITY TYPE <input type="checkbox"/>	OTHER THAN SMALL ENTIT
U.S. NATIONAL STAGE FEES			
BASIC FEE	SMALL ENT. = \$ 150	LARGE ENT = \$ 300	RATE <input type="checkbox"/>
EXAMINATION FEE	Satisfies PCT Article 33(1), (4) = \$ 50 / \$ 100	All other situations = \$ 100 / \$ 200	RATE <input type="checkbox"/>
SEARCH FEE	U.S. is ISA = \$ 50 / \$ 100 ALL other countries = \$ 200 / \$ 400	All other situations = \$ 250 / \$ 500	RATE <input type="checkbox"/>
FEE FOR EXTRA SPEC. PGS.	minus 100 =	/ 50 =	RATE <input type="checkbox"/>
TOTAL CHARGEABLE CLAIMS	18 minus 20 =	.	RATE <input type="checkbox"/>
INDEPENDENT CLAIMS	1 minus 3 =	.	RATE <input type="checkbox"/>
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>		RATE <input type="checkbox"/>
* If the difference in column 1 is less than zero, enter "0" in column 2		TOTAL <input type="checkbox"/>	TOTAL <input type="checkbox"/>

## CLAIMS AS AMENDED - PART II

(Column 1)	(Column 2)	(Column 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE <input type="checkbox"/>	
	Total	*	Minus	X \$ 25 = <input type="checkbox"/>	RATE <input type="checkbox"/>
	Independent	*	Minus	X \$ 100 = <input type="checkbox"/>	RATE <input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			+ \$ 180 = <input type="checkbox"/>	+ \$ 360 = <input type="checkbox"/>	
			TOTAL ADDIT. FEE <input type="checkbox"/>	TOTAL ADDIT. FEE <input type="checkbox"/>	

(Column 1)	(Column 2)	(Column 3)	AMENDMENT B	AMENDMENT C	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE <input type="checkbox"/>	
	Total	*	Minus	X \$ 25 = <input type="checkbox"/>	RATE <input type="checkbox"/>
	Independent	*	Minus	X \$ 100 = <input type="checkbox"/>	RATE <input type="checkbox"/>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			+ \$ 180 = <input type="checkbox"/>	+ \$ 360 = <input type="checkbox"/>	
			TOTAL ADDIT. FEE <input type="checkbox"/>	TOTAL ADDIT. FEE <input type="checkbox"/>	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.